

Work Order ID 87338

July-13-12 1:28:41 PM

U/R***87338***

Page 1

Item ID: D350-748-101

Accept

N9000040100Setup Start ***NS1***Revision ID: ~~U/R~~Stop ***NS2***

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/28/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: ML5Date: 12/07/16 Tooling:

Date:

Run Start ***NR1***

QC:

Date: 12/07/16 SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr

Revision Nbr

D350-748-141

F U/R

OK QP 12/7/16 JB

0.00

DAS 21

100

100

DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile & type labels per PPPD350-748-101 CHC002

110

110

BENDING MACHINE - CROSSTUBES

CNC Bend 1

Memo

0.00

CNC Delta 100 Bender

Bend tube as per Dwg D350-748-141 using CNC bender program D350F and

Folio FT

****UNDER BEND .225" PER SIDE****

120

120

QC15- Crosstube Dimensional Check

QC

Memo

0.00

Quality Control

QCB

DAS 16 9-30

13/2/8

1. JG dms 13-3-28

> [Signature]

13-2-5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 87338

87338

Page 2

July-13-12 1:28:41 PM

Item ID: D350-748-101

Accept

N900040100

Setup Start *NS1*

Revision ID: U/R

Stop *NS2*

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 9/28/12 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

125

0.00

125

Handl' Xtube

Hand Finishing Crosstubes

Memo

Stress relief

Heat treat crosstube as per QSI010 4.3

Temp: _____

Start time: _____

Finish time: _____

0.00

P/O: 19033

issue P/O: meter

CY 13/02/06 ①

127

0.00

127

QC

Quality Control

~~QC~~ Inspect dimensions to drawing

QC

Memo

0.00

DAS
16
9-99

13/2/8

Ne eliva + inspect
Pensur de CATT Achas

P 13/2/8 ①

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 87338

87338

Page 3

July-13-12 1:28:41 PM

Item ID: D350-748-101 Accept *N900040100* Setup Start *NS1*
 Revision ID: U/R Stop *NS2*
 Item Name: Crosstube Installation, High Fwd
 Start Date: 7/10/12 Start Qty: 1.00 *1* Cust Item ID:
 Required Date: 9/28/12 Req'd Qty: 1.00 *1* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Crosstubes	0.00							
130	Memo	0.00							
Crosstubes	1-Drill Tube as per Dwg D350-748-141 Using DT8876 A,B & C Drill Jigs, Set-up drill table as per QSI 010								
Crosstubes	2-Deburr								
	3-Engrave Part # and Batch # as per Dwg D350-748-141								
	4-Remove all marks from tube within limits of D350-748-141								
	5- Apply a light coat of LPS3 on the interior of tube Batch: _____								
140	QC5- Inspect part completeness to step on W/O	0.00							
140	Memo	0.00							
QC	CHECK 10 DEG HOLES WITH DT8876E (EUROCOPTER CLAMP)								
Quality Control									

MO / 13/02/11

> MO 13/02/11

DAS
15
2-89
13012

1

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 87338

87338

Page 4

July-13-12 1:28:41 PM

Item ID: D350-748-101

Accept

N900040100

Setup Start *NS1*

Revision ID: U/R

Stop *NS2*

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 9/28/12 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

150

Outsource process-Cadplate per QSI017 4.1.9.1

0.00

150

Outsource3

Memo

0.00

Outsource process - Cad plate

Issue P/O: 19086
Stress relief at 375° for 5 hours
Magnetic Particle Inspect per ASTM E1444
Cadium Plate per AMS-QQ-P-416B, Class 1, Type 2
Embrittle relief at 375° for 8 hours, Chromate Treat
Possible Supplier: Southwest United Industries
Ensure Certificate of Conformity is attached

CL 13/02/12 ①

160

Receive & Inspect for Damage & Mat'l Certs

0.00

160

Packaging

Memo

0.00

Packaging

Ensure certificate of conformity is attached

★ SEE W/D CHG ATTACHED

13/3/13 ①

170

QCS- Inspect part completeness to step on W/O

0.00

170

QC

Memo

0.00

Quality Control

(DAS 16) 13/03/13

172 - Load

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 87338

87338

Page 5

Wednesday, March 13, 2013 2:27:06 PM

Item ID: D350-748-101

Accept

N9000040100

Setup Start ***NS1***

Revision ID:

Item Name: Crosstube Installation, High Fwd

Stop ***NS2***

Start Date: 7/10/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/28/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

172

0.00

172

Crosstubes

Memo

0.00

Crosstubes

LOAD TEST TO 3500LB FOR 1 MINUTE

13-03-13
CP 13/3/13

174

Outsource process - NDT per QSI038 4.1

0.00

174

Outsource2

Memo

0.00

Outsource process - NDT

7/0! 19344

CY 13/03/14 ①

176

Receive & Inspect for Damage & Mat'l Certs

0.00

176

Packaging

Memo

0.00

Packaging

43/3/15 ①

Work Order ID 87338***87338***

Page 6

Wednesday, March 13, 2013 2:27:06 PM

Item ID: D350-748-101

Accept

N900040100Setup Start ***NS1***

Revision ID:

Item Name: Crosstube Installation, High Fwd

Stop ***NS2***

Start Date: 7/10/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/28/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

178

QC5- Inspect part completeness to step on W/O

0.00

178

QC

Memo

0.00

Quality Control

DAS
05
9-89 13-03-15

180

SprayPaint

0.00

180

SprayPaint

Memo

0.00

Spray Painting

1-Prime inside crosstube as per QSI 005 4.2
2-Prime Outside of Tube as per Dart QSI 005 4.2

190

QC14- Inspect Spray Paint

0.00

190

QC

Memo

0.00

Quality Control

Then, Wrap in plastic bag to protect from scratches

N/A
See sheet
N/A

Work Order ID 87338

87338

Page 5

July-13-12 1:28:41 PM

Item ID: D350-748-101 Accept *N9000040100* Setup Start *NS1*
Revision ID: U/R Stop *NS2*
Item Name: Crosstube Installation, High Fwd
Start Date: 7/10/12 Start Qty: 1.00 *1* Cust Item ID:
Required Date: 9/28/12 Req'd Qty: 1.00 *1* Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
180	SprayPaint	0.00				1	0	10	J.P./AJ
180									13-03-25
SprayPaint	Memo	0.00							
Spray Painting	1-Prime inside crosstube as per QSI 005 4.2 124403 x 12:30-1:15								
	2-Prime Outside of Tube as per Dart QSI 005 4.2								
	3-Paint crosstube 4124952 x 5:15 - 5:45								
190	QC14- Inspect Spray Paint	0.00							
190									
QC	Memo	0.00							
Quality Control	Then, Wrap in plastic bag to protect from scratches								
200	Crosstubes	0.00				1	0	0	AJ
200									13-3-26
Crosstubes	Memo	0.00							
Crosstubes	1-Install Ground wire Insert, then insert screw and washer								
	2-Install Abraision strips as per Dwg D350-748-141 & QSI 035.								
	3-Install supports Using Dt8876 as per Dwg D350-748-141, Torque to 60-80 IN-LBS								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 87338

87338

Page 6

July-13-12 1:28:41 PM

Item ID: D350-748-101

Accept

N900040100

Setup Start *NS1*

Revision ID: U/R

Stop *NS2*

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 9/28/12 Req'd Qty: 1.00 *1*

Customer:




Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
210 *210* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00  13.3 27				1			
220 *220* Packaging Packaging	Pick Kit Memo	0.00 0.00				1		13-03-27 JB	
230 *230* QC Quality Control	QC4- 100% Inspect kits for completeness Memo	0.00  13.4 1				1			

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 87338

87338

Page 7

July-13-12 1:28:41 PM

Item ID: D350-748-101 Accept *N900040100* Setup Start *NS1*
 Revision ID: U/R Stop *NS2*
 Item Name: Crosstube Installation, High Fwd
 Start Date: 7/10/12 Start Qty: 1.00 *1* Cust Item ID:
 Required Date: 9/28/12 Req'd Qty: 1.00 *1* Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
240	Packaging	0.00							
240									
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D350-748-101								
	Location: _____								
	PPP Rev: _____								
250	QC21- Final Inspection - Work Order Release	0.00							
250									
QC	Memo	0.00							
Quality Control									

DAS
06
9-88

1 82 13-4-5

13/4/10

13-04-9

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">Skid-tube <input type="checkbox"/></td> <td style="width: 33%;">Crosstube <input type="checkbox"/></td> <td style="width: 33%;">Water Jet <input type="checkbox"/></td> <td style="width: 33%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
<div style="display: flex; justify-content: space-between;"> <div style="width: 33%;"> <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge </div> <div style="width: 33%;"> <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other </div> </div>		

Picklist Print

July-13-12 1:28:40 PM

Page 1

Work Order ID: 87338

Parent Item: D350-748-101

Parent Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12

Required Date: 9/28/12

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A New Issue 06-07-05 JLM
 IPP Rev:B Update qty of MS21042L5 06-09-12 KJ VERIFY BY:DD
 IPP Rev:C Rev B 07-11-15 DD
 IPP Rev D Combined manufacturing 08.04.02 EC verified by: DD
 IPP Rev:E 08-06-24 revD as per dwg DD verified by:EC IPP Rev:F 10.08.04 added QSI010
 4.3 DD verf:EC
 IPP REV:G ADD UNDER BEND COMMENT 12-05-28 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
ALS4-1032-225 Insert		Purchased	No			200	Each	2,462.0000	1	1		13-3-26	

Location	Loc Qty	Loc Code
FP-B	2019	
122290	2019	
ST281	420	
108696	146	
110768	62	
118386	55	
118966	68	
121269	89	
ST282	23	
120410	10	
120451	13	

Purchased No 220 Each 411.0000

Location	Loc Qty	Loc Code
360	181	
121185	181	
ST360	230	
115108	3	
115705	1	
118838	8	
119328	68	
120423	150	

AN4-41A

Bolt

SMP

8 124241 25 13-03-27

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge _____ _____ _____		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____	

Picklist Print

July-13-12 1:28:40 PM

Page 2

Work Order ID: 87338

Parent Item: D350-748-101

Parent Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12

Required Date: 9/28/12

Start Qty: 1.00

Required Qty: 1.00

AN4-6A Purchased No

Bolt

220 Each 1,363.0000

16

123355 16 JB

Location

Loc Qty

Loc Code

ST356 1363
119017 363
121243 500
122151 500

AN5-32A Purchased No

Bolt

220 Each 277.0000

4

124936 4 JB

Location

Loc Qty

Loc Code

ST339 177
119862 2
120423 75
122151 100
ST340 100
121541 100

AN960JD10 S Purchased No

Washer

NAS1149D0363J

124392

200 Each 0.0000

1

1 13-3-26

AN960JD416 S Purchased No

Washer

NAS1149D0463J

220 Each 29.0000

32

124778 32 JB

Location

Loc Qty

Loc Code

ST351 29
116289 8
119097 21

AN960JD516 S Purchased No

Washer

NAS1149D0563J

220 Each 12.0000

8

122452 8 JB 13-03-27

Location

Loc Qty

Loc Code

ST338 12
2612 12

July-13-12 1:28:41 PM

Shop Packet Print

Page 2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Picklist Print

July-13-12 1:28:41 PM

Page 3

Work Order ID: 87338

Parent Item: D350-748-101

Parent Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12

Required Date: 9/28/12

Start Qty: 1.00

Required Qty: 1.00

D2856-400

Abrasion Strip

Manufactured No

200 f

143.0425

1.181

1.2431579

AS 13-3-26

Location

Loc Qty

Loc Code

ST403

133.598

81875

133.598

ST409

9.4445

63735

0.6696

68076

0.3149

71164

8.46

D3500-1

Saddle

Manufactured No

220 Each

51.0000

89220 4 16

Location

Loc Qty

Loc Code

ST423

40

85421

40

ST425

11

76940

11

D3501-1

Bushing

Manufactured No

220 Each

232.0000

88532 16 13-03-27

Location

Loc Qty

Loc Code

ST051

232

67757

4

73391

6

74866

206

85414

16

D3502-1

Support

Manufactured No

200 Each

47.0000

2 2

AS 13-3-26

Location

Loc Qty

Loc Code

LG050

37

77041

37

ST051

10

73419

9

74873

1

July-13-12 1:28:41 PM

Shop Packet Print

Page 3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear	General	Other
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped.	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

Picklist Print

July-13-12 1:28:41 PM

Page 4

Work Order ID: 87338

Parent Item: D350-748-101

Parent Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12

Required Date: 9/28/12

Start Qty: 1.00

Required Qty: 1.00

D350-748-141TRN

Manufactured No

110 Each 2.0000

Crosstube Turning Detail

1 SAD 13-02-05

Location

Loc Qty

Loc Code

LG

2

83277

1

83278

1

391174

①

220 Each 2,085.0000

24 24 124231 JB

MS21042L4
Nut

Purchased No

Location

Loc Qty

Loc Code

ST300

2085

119075

116

121011

193

121444

1776

220 Each 1,066.0000

4 123900 JB

MS21042L5
Nut

Purchased No

Location

Loc Qty

Loc Code

300

500

121652

500

ST300

566

108827

4

116105

5

116548

43

119109

502

17651

4

2937

8

200 Each 127.0000

2 2 AL 13-3-26

MS21920-20

Purchased No

Clamp (per MIL-DTL-8783C)

Location

Loc Qty

Loc Code

LG050

127

116799

8

120676

8

121067

2

121274

34

122254

75

July-13-12 1:28:41 PM

Shop Packet Print

Page 4

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
---	---	--

Picklist Print

July-13-12 1:28:41 PM

Page 5

Work Order ID: 87338

Parent Item: D350-748-101

Parent Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12

Required Date: 9/28/12

Start Qty: 1.00

Required Qty: 1.00

MS27039-1-10

Purchased

No

200

Each

141.0000

1

1

Screw

Location

Loc Qty

Loc Code

GA

160

120449

100

ST291

5

120120

5

ST308

36

122027

36

124326

①

AS 13-3-26

July-13-12 1:28:41 PM

Shop Packet Print

Page 5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

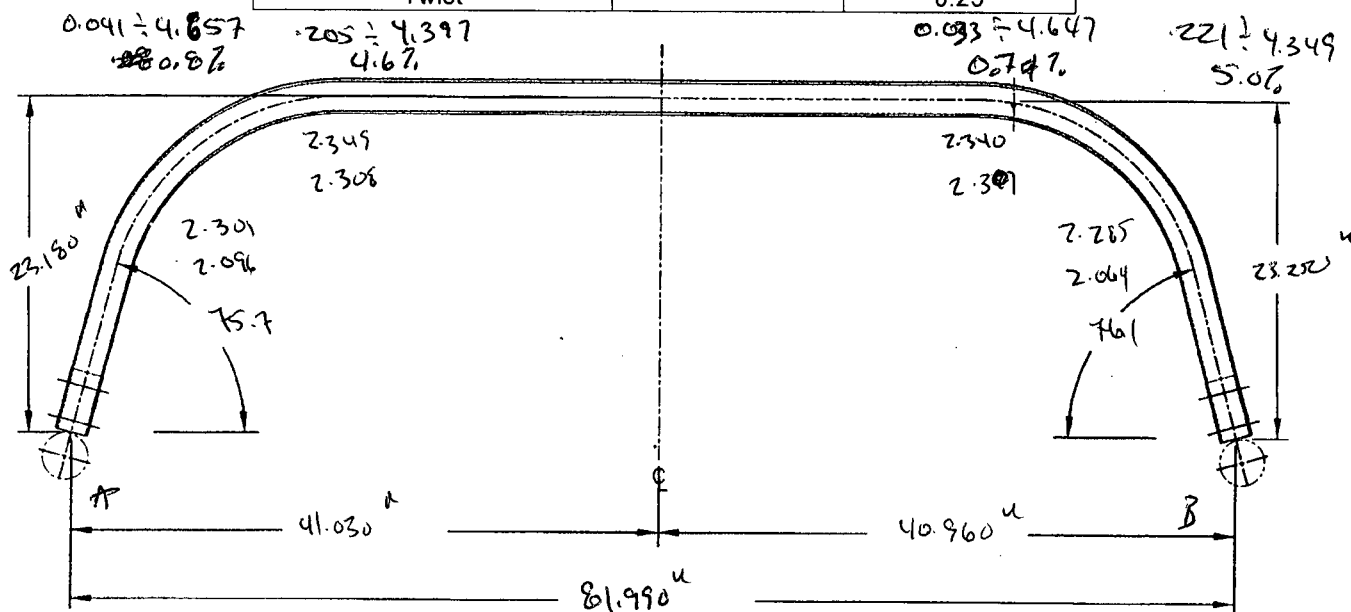
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
---	---	---	--	---

DART AEROSPACE LTD		Work Order:	87338
Description: Crosstube High Fwd (AS350/355)		Part Number:	D350-748-101
Inspection Dwg: D350-748-141 Rev: F		Page 1 of 1	

Required Dimension	Min	Max
Height	23.12	23.38
1/2 Span	40.77	41.03
Angle	75	77
Total Span	81.55	82.05
Bending Passes	7	--
Crushing	--	6%
Twist	--	0.25



	Side A	Side B
Bending Passes		
Crushing		
Comments		
Side A = Crushing at Top = 0.8% at Bottom = 4.6%		
Side B = Crushing at Top = 0.7% at Bottom = 5.0%		
Twist = 0.095		

QC15 Inspection	DAS
Date	16 / 13 / 2018

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	10.08.23	Dwg Rev updated	KJ	
C	11.11.07	Dwg Rev updated	KJ	
D	12.04.16	Added bending, crushing & twist dimensions	KJ	CP

Item	Qty -141	Part Number	Description
1	X	D350-748-141	CROSSTUBE ASSEMBLY (AS 350/355 HI FWD)
2	1	D6015-125	CROSSTUBE (OR D6017-115)
3	2	D3502-1	SUPPORT
4	2	D2856-400-710	ABRASION STRIP
5	1	AELS-1032-225	INSERT
6	1	NAS1149D0363J	WASHER (OR AN960JD10)
7	2	MS21920-20	CLAMP (PER DART SPEC. M-MS21920-20)
8	1	MS27039-1-10	SCREW

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6015-125 OR D6017-115
FINISHED LENGTH = 110.270±0.06
- 2) FINISH: MAGNETIC PARTICLE INSPECT PER DART QSI 038 4.2
CADMIUM PLATE PER AMS-QQ-P-416B, CLASS 1, TYPE II
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: DART PART NUMBER "D350-748-141" AND BATCH NUMBER ON INSIDE OF CUFF
PER DART QSI 044 6.4 (VIBRATING STYLUS)
- 7) WEIGHT: 30.45 lbs
- 8) PART IS SYMMETRIC ABOUT CENTERLINE, EXCEPT FOR Ø0.297 HOLE.
- 9) BLEND OUT ALL EDGES FROM MACHINING LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.
NOTE: ALL HOLES ARE DRILLED AFTER BENDING.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 7 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- 11) HEAT TREAT TO MIN. 180 KSI PER MIL-T-6736 OR AMS 2759-1C AFTER TURNING. ACCEPTABLE TO VERIFY TENSILE STRENGTH BY HARDNESS TEST PER ASTM E18 TO 40-45 HRC.
- 12) INSTALL D2856-400-710 ABRASION STRIPS WITH A GAP ON BOTTOM SIDE OF CROSSTUBE, CENTERED OPPOSITE D3502-1 SUPPORT, PER QSI 035.
- 13) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE. WHEN DRILLING HOLES EXTREME CARE MUST BE TAKEN AND CAREFUL DEBURRING PERFORMED TO ENSURE A CLEAN HOLE WITH NO CRACKING/CHIPPING/GROOVES.
- 14) TORQUE CLAMPS 60 TO 80 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.
- 15) MAX TWIST AFTER BENDING: WITH XTUBE LAYED FLAT ON SURFACE, THE DIFFERENCE BETWEEN CUFF HEIGHTS FROM THE SURFACE MAY BE NO LARGER THAN 0.25 (ZN C1-3).

SHOP COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO AMENDMENT
WITHOUT NOTICE
WORK ORDER
NO. 87338 115
12/07/16

UNDER REVIEW
11.07.12

RELEASED
2011-01-18

F	ADD HRC TEST OPTION (B8-1) PER PAR 09-040, ADD TWIST LIMIT (A8-1, C1-3), ADD D6015-125 OPTION (C8-1), STOCK DIM NOW MACHINED (D1-4)	CP	10.11.23
E	REVISE GENERAL NOTES; UPDATE TO CURRENT ADD STANDARDS; RELOCATED FLAG #6 PER PAR 08-046 (ZN A6-3); TOLERANCES (ZN C6-3, D1-3)	RF	09.09.30
D	MAG. PARTICLE AND CAD PLATE AS MFD.	CP	06.10.31
C	ADD CAD PLATING	CP	06.08.14
B	ADD D6017-115 & PRIME AND PAINT	CP	06.06.30
A	NEW ISSUE	CP	06.03.31
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	10.11.23		

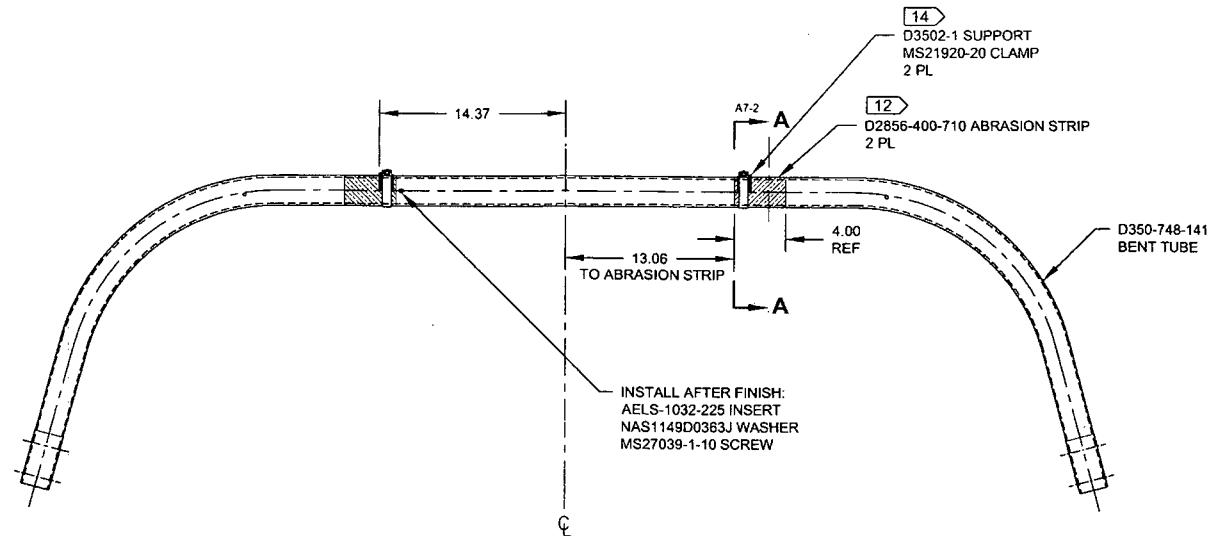
DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D350-748-141** REV. F, SHEET 1 OF 4

TITLE **CROSSTUBE (AS 350/355 HI FWD)** SCALE **NTS**

COPYRIGHT © 2006 BY DART AEROSPACE LTD
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMBINED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD

87338

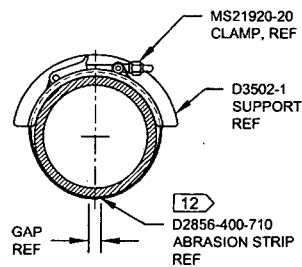


**D350-748-141
ASSEMBLY DETAIL**

UNDER REVIEW

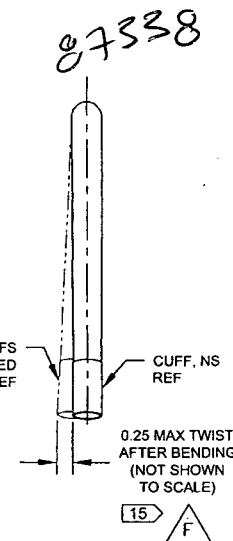
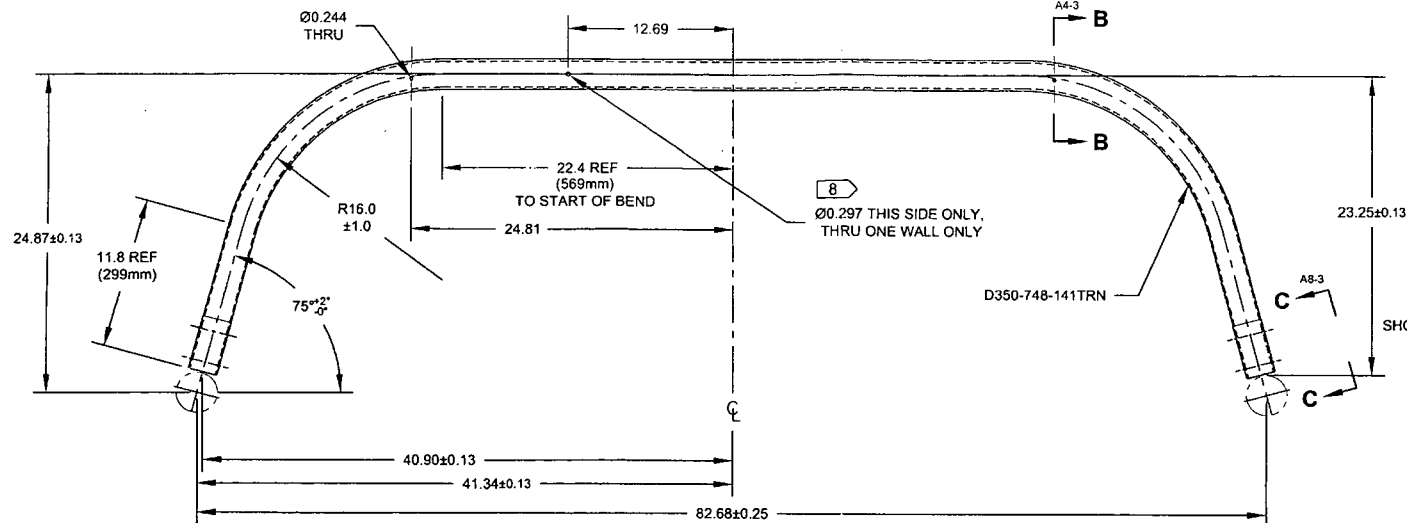
11.07.11

RELEASED
2011-01-18

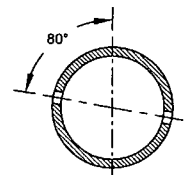
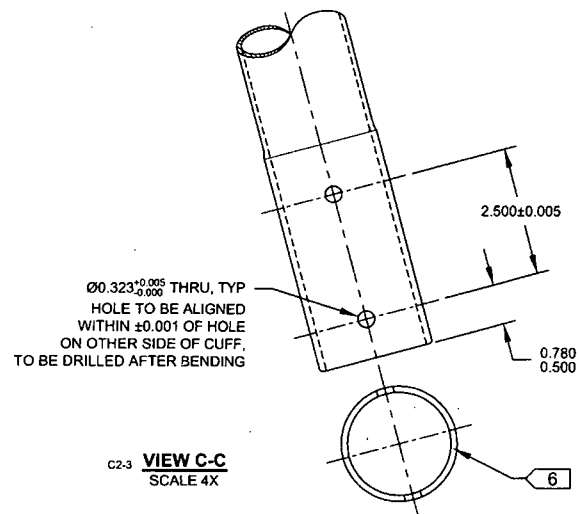


SECTION A-A D4-2
SCALE 4X

DESIGN	97	DART AEROSPACE LTD	
DRAWN	97	HAWKESBURY, ONTARIO, CANADA	
CHECKED	97	DRAWING NO.	REV. F
MFG. APPR.	97	D350-748-141	SHEET 2 OF 4
APPROVED	97	TITLE	SCALE
DE APPR.	97	CROSSTUBE (AS 350/355 HI FWD)	NTS
DATE	10.11.23	COPYRIGHT © 2006 BY DART AEROSPACE LTD	
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.			



D350-748-141
BENDING AND DRILLING DETAIL 10



SECTION B-B D3-3
 SCALE 4X

UNDER REVIEW
 11.07.12

RELEASED
 2011-01-18

DESIGN	DP	DART AEROSPACE LTD	
DRAWN	DP	HAWKESBURY, ONTARIO, CANADA	
CHECKED	h	DRAWING NO.	REV. F
MFG. APPR.	h	D350-748-141	SHEET 3 OF 4
APPROVED	h	TITLE	SCALE
DE APPR.	h	CROSSTUBE (AS 350/355 HI FWD)	NTS
DATE	10.11.23	COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR QUANTIFIED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

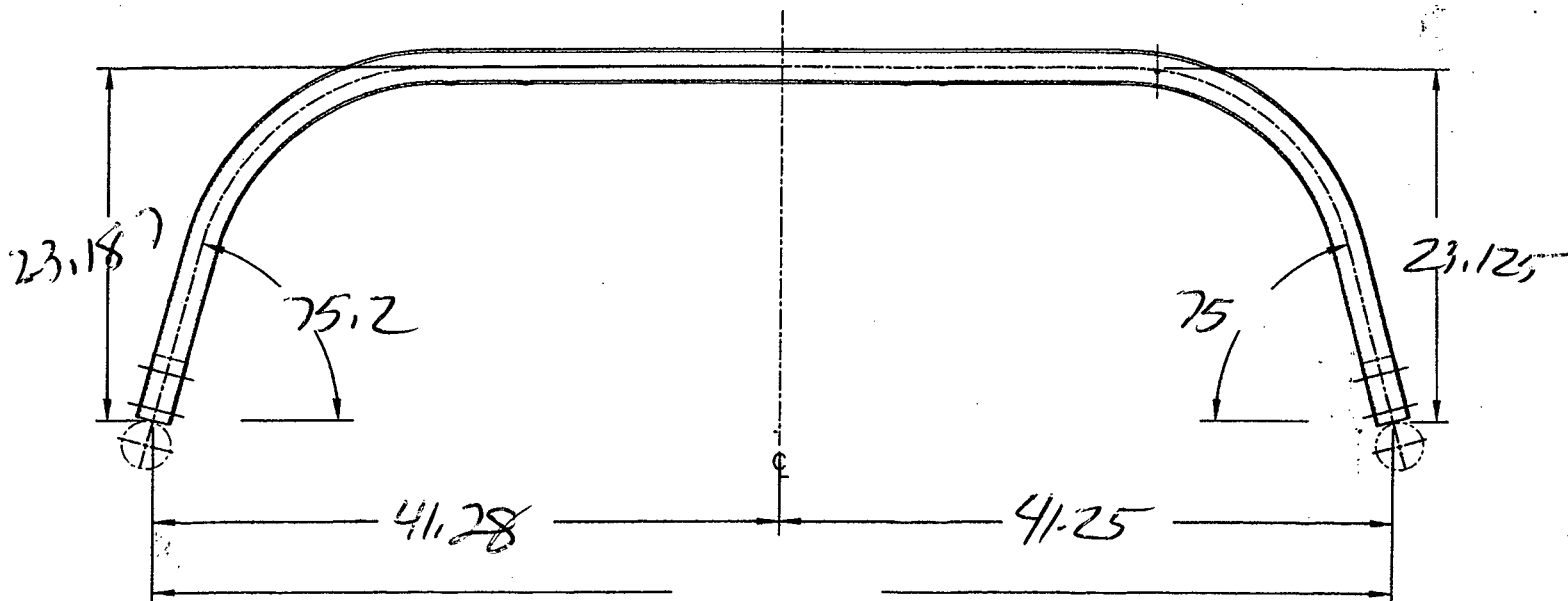
QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input checked="" type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <table style="width:100%; font-size: small;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>						Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>																								
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>																								
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>																								
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																									
<i>THIS WO ONLY</i>																											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector																		
Doc/Data	12/7/16	161	1	LOAD TEST TUBE TO 3500 LB FOR 1 MINUTE	CP 12/7/15																						
Equip/Tooling																											
Operator																											
Material																											
Setup	12/7/16	162	1	NDT TUBE	CP 12/7/15																						
Other																											
Process																											
Supplier																											
Training																											
Unapproved																											
FAULT CATEGORY																											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other																

Measured Before De-Store

DART AEROSPACE LTD		Work Order: 87338
Description: Crosstube High Fwd (AS350/355)		Part Number: D350-748-101
Inspection Dwg: D350-748-141	Rev: F	Page 1 of 1

Required Dimension	Min	Max
Height	23.12	23.38
1/2 Span	40.77	41.03
Angle	75	77
Total Span	81.55	82.05
Bending Passes	7	--
Crushing	--	6%
Twist	--	0.25



	Side A	Side B
Bending Passes	37	39
Crushing		
Comments		
TWIST - 0.124		

DF
13-2-5

QC15 Inspection	
Date	

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	10.08.23	Dwg Rev updated	KJ	
C	11.11.07	Dwg Rev updated	KJ	
D	12.04.16	Added bending, crushing & twist dimensions	KJ	

METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC J7R 5A8
Tel: 450-473-1884 / Fax: 450-491-5498

Reçu de livraison

Delivery Receipt

BON DE TRAVAIL Order	EXPÉDITEUR Shipper ID	BON D'EXPÉDITION Shipper
183442	1	68559

EXPÉDITION COMPLÈTE / Shipped Complete

CLIENT /Customer 215

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
Ph: 613-632-5200
Fax: 613-632-1053

LIVRÉ À /Shipped To

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
Ph: 613-632-5200
Fax: 613-632-1053

COMMANDE DU CLIENT Customer PO	BON DE LIVRAISON DU CLIENT Customer Shipper No.	TYPE DE MATÉRIEL Material Type	DATE DE LA COMMANDE Order Date	TRANSPORTEUR Carrier
PO19033		STEEL	2013/2/6	CLIENT

QUANTITÉ Quantity	No. PIÈCE / Part No.	NOM DE LA PIÈCE / Part Name	DESCRIPTION DE LA PIÈCE Part Description	POIDS Weight
----------------------	-------------------------	--------------------------------	---	-----------------

2 D350-748-101
CROSSTUBE
(1) CROSSTUBE
REFERENCE: 87338

60,

(1) D350-748-101
CROSSTUBE
REFERENCE 95050

CONTENANT: 1 NIL

TYPE DE CONTENEUR Container Type	# DE CONTENEURS # Of Containers	COMMENTAIRES CONTENEUR Container Comments
NIL	1	

CERTIFICAT

EMPAQUETAGE Packing	
------------------------	--

QUANTITÉ EXPÉDIÉE / Quantity Shipped : 2

POIDS EXPÉDIÉ / Weight Shipped : 60,00

QUANTITÉ RESTANTE / Quantity Remaining : 0

POIDS RESTANT / Weight Remaining : 0,00

CERTIFICAT

QUANTITÉ EXPÉDIÉE /Quantity Shipped: 2

POIDS EXPÉDIÉ / Weight Shipped : 60,00

Signature:

Date:

METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC, J7R 5A8

Tel: 450-473-1884 / Fax: 450-491-5498

Certificat de Conformité Détaillé

Detailed Certificate of Compliance

BON DE TRAVAIL order	CHARGEMENT load
183442	1

CLIENT / customer 215

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

LIVRÉ À / shipped to:

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

1

COMMANDE DU CLIENT customer po	BON DE LIVRAISON DU CLIENT customer shipper no.	MATÉRIEL material	CODE DE TRAITEMENT mat'l heat code	NUMÉRO DE LOT lot number						
PO19033										
SPÉCIFICATIONS DU PROCÉDÉ processing specifications										
STRESS REL										
SAE AMS 2759/1 REV.E										
EXIGENCE / requirement SPÉCIFICATIONS / specified TESTS EXÉCUTÉS / performed RÉSULTATS DE TESTS / results										
Visual										
QUANTITÉ quantity	POIDS weight	DESCRIPTION DES PIÈCES parts description								
2	60	D350-748-101 CROSSTUBE (1) CROSSTUBE REFERENCE: 87338 (1) D350-748-101 CROSSTUBE REFERENCE 95050 CONTENANT: 1 NIL								
Operation	Temp. spécifiée Specified Temp	Temps de tremp Spécifié Specified Soak Temp	Atmosphère	Carbone Carbon Potential	Q-Media Q-Temp	Four # Furnace #	Date Départ Start Date	Heure d'entrée Time In	Heure de sortie Time Out	Date Complétée Date complete
1.00 CONT. INIT.	LAVAGE		si nécessaire							
2.00 PREPARING	COMPTAGE									
3.00 STRESS RE	343°C+/-6°C	2:00	air			701				
4.00 FINAL INSP							02-07-2013			02-07-2013

COMMENTAIRES / comments

LES TRAITEMENTS THERMIQUES SUR CETTE COMMANDE A ÉTÉ FAIT EN UTILISANT DES ÉQUIPEMENTS EN CONFORMITÉ AVEC LES REQUIS DE LA SPÉCIFICATION AMS2759.
TOUTES LES OPÉRATIONS DE TRAITEMENT THERMIQUE ONT ÉTÉ FAITES EN CONFORMITÉ AVEC LES REQUIS

METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC, J7R 5A8

Tel: 450-473-1884 / Fax: 450-491-5498

Certificat de Conformité Détaillé

Detailed Certificate of Compliance

BON DE TRAVAIL order	CHARGEMENT load
183442	1

CLIENT / customer 215

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

LIVRÉ À / shipped to:

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

1

ON K6A 1K7

TOUTES LES OPERATIONS DE TRAITEMENT THERMIQUE ONT ÉTÉ FAITES EN CONFORMITÉ AVEC LES REQUIS DE LA SPÉCIFICATION DEMANDÉE ET TOUTES LES VÉRIFICATIONS ET LES TESTS DEMANDÉS ONT ÉTÉ FAITES ET DOCUMENTÉS.

AUCUN CHANGEMENT OU DÉROGATION N'A ÉTÉ FAITE PAR RAPPORT AU TRAITEMENT THERMIQUE DEMANDÉ. ON CERTIFIE QUE LE MATÉRIEL A ÉTÉ FABRIQUÉ, ÉCHANTILLONNÉ, TESTÉ ET INSPECTÉ EN ACCORD AVEC LES SPÉCIFICATIONS DU MATÉRIEL ET LE BON DE COMMANDE ET LE MATÉRIEL RENCONTRE LES EXIGENCES SPÉCIFIÉS.

ACCOMPLISHED USING HEAT TREATMENT EQUIPMENT THAT MEETS THE REQUIREMENTS OF AMS 2759. ALL THE HEAT TREATMENT OPERATIONS WERE ACCOMPLISHED IN ACCORDANCE WITH THE REQUESTED/REQUIRED HEAT TREATMENT SPECIFICATION AND ALL REQUIRED VERIFICATIONS TEST HAVE BEEN PERFORMED AND DOCUMENTED. NO UNAUTHORIZED CHANGES OR ALL THE HEAT TREATMENT PROCESSING PERFORMED ON THIS ORDER WAS DEVIATIONS TO REQUIRED HEAT TREATMENT SPECIFICATIONS OR PROCEDURES HAVE BEEN PERFORMED.

WE CERTIFY THAT THE MATERIAL WAS MANUFACTURED, SAMPLED, TESTED AND INSPECTED IN ACCORDANCE WITH THE MATERIAL SPECIFICATION AND THE PURCHASE ORDER AND WAS FOUND TO MEET THE REQUIREMENTS.

APPROUVÉ par / Approved by:

Isabel Gero

METCOR
12

DATE: 2013-02-07

/ Nous certifions que toute l'information comprise sur ce rapport est exacte et conforme aux requis du client. / We certify that all the information on this report is exact and in accordance with the order requirements.

**CERTIFICATE OF
CONFORMANCE**

**CADORATH PLATING CO. LTD.
2150 LOGAN AVENUE
WINNIPEG, MANITOBA R2J-0J1**

DATE: Mar-01-2013

CONSIGNED TO: Dart Aerospace Ltd.
1270 Aberdeen St.
Hawksbury, ON K6A 1K7

W/O #: 121907
INVOICE #: 64828

**CONTRACT OR
PURCHASE ORDER #** PO19086

DESCRIPTION: CROSSTUBE

QTY 1

P/N # d350-748-101

S/N # 87338

STRIP IAW MIL-STD-871. MPI IAW ASTM-E-1444. CADMIUM PLATING
IAW AMS-QQ-P-416C TYPE 2 YELLOW CLASS 1. MPI IAW ASTM-E-
1444. BAKE HEAT CHART # 13-166 AND # 13-198.

8/3/3/13

**CERTIFICATE: I certify that the items indicated here on have
been inspected and tested and conform to all specifications
and requirements detailed on the contract or purchase order.**



Approved Inspector:

A handwritten signature in dark ink, appearing to be a stylized name, written over a horizontal line.



LIQUID PENETRANT TEST REPORT

P- 12701

CLIENT
ATTENTION
ADDRESS
PROJECT
ITEM(S) EXAMINED

DART AERO SPACE
ANDY
1270 ABERDEEN ST
HAWKESBURY, ON.

PAGE 1 OF 1
DATE March 14/13 TIME AM ☒ PM ☐
ACUREN JOB NO. 100-13-0056
PO/WO NO. 19344-
WORK LOCATION SAME
ACCEPTANCE STD. ASTM 1417/01-038 REV./DATE 2005

F.P.I. on CROSS TUBES

(8)

JOB DESCRIPTION ON PROCEDURE NO. LT-002 REV./DATE 2008 TECHNIQUE NO. LT-002 REV./DATE 2008
PART NO. SEE RESULTS MATERIAL STEEL THICKNESS VARIOUS
SCOPE A WET FLUORESCENT LIQUID PENETRANT EXAMINATION WAS COMPLETED ON THE 100% OF SURFACE

TEST DETAILS
METHOD ☒ FLUORESCENT ☐ VISIBLE ☒ WATER WASH ☐ SOLVENT REMOVABLE ☐ POST EMULSIFIED
FAMILY BRAND MAGNAFLUX BLACK LIGHT S/N 16459 ☐ OUTPUT > 1000 μ W/cm² ☐ AMBIENT < 2 fc
PENETRANT 267 MINIMUM DWELL TIME 45 MIN. LIGHTING EQUIP. ☐ FLASHLIGHT ☐ TROUBLELIGHT ☐ OUTPUT > 100 fc @ SURFACE
PENETRANT REMOVER H2O MINIMUM DRY TIME > 10 MIN. OTHER LABW0
DEVELOPER S6052 MINIMUM DWELL TIME 10 MIN. LIGHT METER S/N CAL DUE DATE
DEVELOPER TYPE ☒ NON AQUEOUS ☐ AQUEOUS ☐ DRY

TEST SURFACE
SURFACE CONDITION ☐ AS GROUND ☐ AS WELDED ☒ MACHINED ☐ SHOT BLASTED ☒ CLEAN BARE METAL
SURFACE TEMPERATURE ☐ < -4°C/20°F ☐ -4°C/20°F TO 10°C/50°F ☒ 10°C/50°F TO 52°C/125°F ☐ > 52°C/125°F

RESULTS-		(<input type="checkbox"/> METRIC <input type="checkbox"/> IMPERIAL)	
ITEM	COMMENTS	ACCEPT	REJECT
	CROSS TUBE W.O. #		
1	" " 94601	✓	
1	" " 90045	✓	
1	" " 95047	✓	
1	" " 94599	✓	
1	" " 94600	✓	
1	" " 95050	✓	
1	" " 90044	✓	
1	" " 87338	✓	

M/13-015

Scope of Services
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES
CLIENT REPRESENTATIVE Andy Sheldon PRINT SIGNATURE
TECHNICIAN (SIGNATURE): Mike Johnston
NAME (PRINT):
CGSB LEVEL 2 SNT LEVEL 6606
CGSB REG. NO. 6606
DTR # E-63755
REPORT REVIEWED BY:
NAME INITIALS
CGSB LEVEL 2 SNT LEVEL
CGSB REG. NO.